

CITY OF MILPITAS COMMISSION/COMMITTEE APPLICATION

City Clerk's Office

MAR 13 2006

PROVIDE COMPLETE INFORMATION (in black ink)

RECEIVED
Senior Advisory Commission applicants
only: are you a member of Milpitas Senior
Center? YES / NO

Name: Oliver First K. Middle Wan Last

Address: 925 Galindo Court Number 408-263-7088 Street oliver@hillbo-inc.com Apt. #

Telephone Number(s) 408-252-9883 e-mail address

Are you a registered voter? yes How long have you lived in Milpitas? 18 years

Present Employer Self Employed Business Telephone 408-252-9883

Address 10745 S. De Anza Blvd., #C, Cupertino, CA Occupation owner

Education: If Youth Advisory Commission applicant, indicate your grade/school:

College, Professional, Vocational, or other schools attended	Major Subject	Date	Degree
UC Berkeley	Computer Science	1980	Graduate work
UCLA	Physics	1974	BS

List community organizations to which you belong or have belonged (additional information may be attached):

Date	Name of Organization	Officer / Member
2004-2005	Association of Northern California Chinese School	President
2001-2003	Benyessa Chinese school	Principal
1999-2001	Art and wine festival, Benyessa	member
2005-2006	Community Commission, Milpitas	Adviser

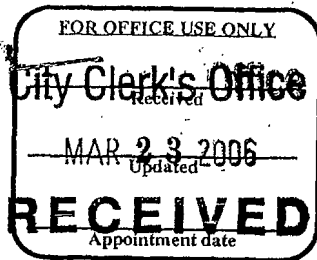
Briefly describe the personal qualifications you possess which you believe would be an asset (additional information may be attached):

I have sufficient time to devote to this responsibility and will attend the required meetings if I am appointed to fill a future vacancy. I hereby certify that all statements contained in this application are true.

Oliver Wan Signature 3/13/06 Date

Appointments to Commissions or Committees are made by the Mayor with the concurrence of the City Council. Applications not acted upon will expire after one year from the date submitted unless renewed by the applicant.

NOTE: ALL COMMISSION APPLICATIONS ARE PUBLIC RECORD
Mail or drop off your completed application to the City Clerk, 455 E. Calaveras Blvd., Milpitas, CA 95035



COMMUNITY SERVICE APPLICATION



(Type or Print Clearly)

PLEASE ANSWER ALL QUESTIONS COMPLETELY

Senior Advisory
COMMISSION APPLYING FOR

Name: "B" BERNICE Hope WRINKLE (408) 263-3297
First Middle Last Home Telephone
Address: 2269 Petersburg DR Milpitas CA 95035
Number Street Apt. #
Are you a United States Citizen? Yes How long have you lived in Milpitas? 37 years
Self employed ()
Present Employer Business Telephone

Address Occupation

Education:

College, Professional, Vocational or other schools attended	Major Subject	Date	Degree
SAN JOSE STATE	FLORAL Teacher	1/3/89	Teaching Creden
	FLORAL Teacher	8/82	design Creden

List the community organizations to which you belong or have belonged (additional information may be attached):

Date	Name of Organization	Chair? Member?
2005/2006	AARP Milpitas-Berryessa Chapter #4786	member / SECRETARY
2004/2006	Berryessa Senior Center	member
1954/2006	Fremont High School Alumni Association	VOLUNTER
1998/2006	Milpitas Chamber of Commerce	OFFICE MANA - VOLUNTER
1970/2006	SPANISH HERITAGE SOCIETY	member

Briefly describe the personal qualifications you possess which you feel would be an asset (additional information may be attached):

All above

I have sufficient time to devote to this responsibility and will attend the required meetings if I am appointed to fill a future vacancy. I hereby certify that all statements contained in this application are true.

Bernice H. Wrinkle
Signature

March 23, 06
Date

Appointments to commissions are made by the Mayor with the concurrence of the City Council. Applications not acted upon will expire after two years from date submitted unless renewed by applicant.

NOTE: ALL COMMUNITY SERVICE APPLICATIONS ARE PUBLIC RECORD

Mail directly to: City Clerk, 455 E. Calaveras Blvd., Milpitas, CA 95035